

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SMC	71022	9/2/99
O.I.P.E. CLASSIFIER		10	9/8/99
FORMALITY REVIEW	59573		9-13-99

59573

INDEX OF CLAIMS

10-29-99

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

deleted C.C.
deleted

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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